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B6 Summary (Official Form 6 - Summary) (12/14)

### United States Bankruptcy Court Eastern District of Virginia

In re	Robert T. Hill			Case No	15-34969		
		Deb	tor ,				
				Chapter		13	

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	305,000.00		
B - Personal Property	Yes	3	49,198.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		351,203.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		58,544.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,836.25
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,784.33
Total Number of Sheets of ALL Schedu	ıles	16			
	T	otal Assets	354,198.00		
			Total Liabilities	409,747.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

### United States Bankruptcy Court Eastern District of Virginia

In re	Robert T. Hill		Case No	15-34969	
_		Debtor	,		
			Chapter	13	

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	41,176.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	41,176.00

#### State the following:

Average Income (from Schedule I, Line 12)	6,836.25
Average Expenses (from Schedule J, Line 22)	4,784.33
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	9,408.36

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		26,045.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		58,544.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		84,589.00

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B6A (Official Form 6A) (12/07)

In re	Robert T. Hill		_,	Case No	15-34969	
		D-1-4	-/			

Debtor

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Location: 14601 Tealby Drive, Midlothian VA 23112 Chesterfield County	Sole	-	305,000.00	328,934.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Debtor Estimate - \$305,000 Tax Assessment - \$302,000 Zillow Range - \$295,000 - \$326,000

Sub-Total > **305,000.00** (Total of this page)

Total > **305,000.00** 

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B6B (Official Form 6B) (12/07)

In re	Robert T. Hill		Case No.	15-34969
-		Debtor,		

Debtor

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash - Approx.	-	130.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account - Wells Fargo \$500 Approx. Savings Account - Wells Fargo \$43	-	543.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	-	3,800.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Books, Pictures, Decorative Art, CD's and Old Records	-	250.00
6.	Wearing apparel.	Clothes	-	350.00
7.	Furs and jewelry.	X		
8.	Firearms and sports, photographic, and other hobby equipment.	Fishing Rods, Reels and Trophies	-	200.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Life Insurance w/ Employer Term NO Cash Value	-	0.00
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > **5,273.00** (Total of this page)

**<sup>2</sup>** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re Robert T. Hill C	Case No	15-34969
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Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		y 401K \$1,400 Approx. Pension \$20,000 Approx.	-	21,400.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(7)	Sub-Total of this page)	al > 21,400.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Robert T. Hill	Case No. <b>15-34969</b>

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	2008 0	GMC Yukon 157,086 Miles	-	16,375.00
	other vehicles and accessories.	2003 G	GMC Yukon 240,000 Miles	-	6,125.00
26.	Boats, motors, and accessories.	x			
27.	Aircraft and accessories.	x			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	x			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	x			
35.	Other personal property of any kind not already listed. Itemize.	Grill		-	25.00

Sub-Total > (Total of this page)

Total > 49,198.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

22,525.00

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B6C (Official Form 6C) (4/13)

In re	Robert T. Hill		Case No.	15-34969	
•		, Debtor			

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Household Goods and Furnishings Household Goods	Va. Code Ann. § 34-26(4a)	3,800.00	3,800.00
Wearing Apparel Clothes	Va. Code Ann. § 34-26(4)	350.00	350.00
Interests in IRA, ERISA, Keogh, or Other Fidelity 401K \$1,400 Approx. At&t Pension \$20,000 Approx.	Pension or Profit Sharing Plans Va. Code Ann. § 34-34	21,400.00	21,400.00

Total: 25,550.00 25,550.00

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B6D (Official Form 6D) (12/07)

In re	Robert T. Hill	Case No. <u>15-34969</u>

Debtor

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	1	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN		DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 5841  Collington Community Associati c/o ACS West, Inc. P.O. Box 11361 Richmond, VA 23230		_	2015 HOA Dues Location: 14601 Tealby Drive, Midlothian VA 23112 Chesterfield County Debtor Estimate - \$305,000 Tax Assessment - \$302,000 Zillow Range - \$295,000 - \$326,000 Value \$ 305,000.00	T	A T E D		442.00	442.00
Account No. xxxxxxxxx4145  Select Portfolio Svcin Po Box 65250 Salt Lake City, UT 84165		_	Opened 12/15/05 Last Active 8/21/15 Deed of Trust Location: 14601 Tealby Drive, Midlothian VA 23112 Chesterfield County Debtor Estimate - \$305,000 Tax Assessment - \$302,000 Zillow Range - \$295,000 - \$326,000 Value \$ 305,000,00				328,492.00	22 402 00
Account No. xxxxxxxxxxxxx8207  Springleaf Financial S 601 Nw 2nd St Evansville, IN 47708		_	Opened 5/07/14 Last Active 6/19/15  Title  2003 GMC Yukon 240,000 Miles  Value \$ 6,125.00				3,783.00	23,492.00
Account No. xxxxxxxx2760  Wfds Po Box 1697 Winterville, NC 28590		_	Opened 9/25/12 Last Active 8/01/15  Title  2008 GMC Yukon 157,086 Miles				·	
continuation sheets attached	<u></u>	<u> </u>	Value \$ 16,375.00 S (Total of the second content of the second con	ubt his p			18,486.00 351,203.00	2,111.00 26,045.00
			(Report on Summary of Sc	T	ota	1	351,203.00	26,045.00

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B6E (Official Form 6E) (4/13)

In re	Robert T. Hill		Case No	15-34969	
_					
		Debtor			

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be eled

liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated."
"Disputed." (You may need to place an "X" in more than one of these three columns.)  Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. $\S$ 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Robert T. Hill		Case No	15-34969
_		Debtor		

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Tax year??? Notice???? Account No. Commonwealth of VA-Tax 0.00 P.O. Box 2156 Richmond, VA 23218-2156 0.00 0.00 Tax year??? Notice???? Account No. Internal Revenue Service 0.00 **Centralized Insolvency Unit** P O Box 7346 Philadelphia, PA 19101-7346 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00 Total 0.00 (Report on Summary of Schedules) 0.00 0.00

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D CE	OCC . 1	-	CEN	(10/07)	
BOF (	Official	Form	OF)	(12/07)	

In re	Robert T. Hill		Case No	15-34969
_	Debtor	,		

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H V C			II	I S	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxx0003			Opened 9/13/06 Last Active 8/07/15	G E N T	TED		
Aes/Goal Financial Po Box 61047 Harrisburg, PA 17106		_	Student Loans - Pay Outside of Plan		D		41,176.00
Account No. xxxxxxxxxxxx9140			Opened 6/24/04 Last Active 5/01/09				
Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238		-	Credit Card				2,237.00
Account No. xxxxxxxx9812			Opened 12/04/12 Last Active 9/01/15				
Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238		-	Credit Card				
							722.00
Account No. 2083  Cash Net dba Cash Advance Centers 2825 South Crater Rd; Unit A Petersburg, VA 23805		_	7/2015 Loan				1,637.00
_1 continuation sheets attached			(Total of	Sub			45,772.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert T. Hill			Case No	15-34969	_
_		Debtor	,			

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

						_	_	
CREDITOR'S NAME,	CODEBTOR	Hu	sband, Wife, Joint, or Community	- c	U N	D	- 1	
MAILING ADDRESS	Ď	Н	DATE CLAIM WAS INCURRED AND	N	L	S	3	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	-11	lο	Ų	ار	
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	I N	۱	ΙE	E	AMOUNT OF CLAIM
(See instructions above.)	R	ľ		N G E N	D	D	1	
Account No. xxxxxxxxxxxx5891			Opened 4/17/09 Last Active 12/29/10	Τ̈́	ΙT		Ī	
	1			L	Ė D			
Citifinancial			Unsecured					
300 Saint Paul Pl		-						
Baltimore, MD 21202								
								5,093.00
								3,093.00
Account No. xxxxxxxxxxxxx1235			Opened 10/04/12 Last Active 2/01/12					
	1							
Dermatology Assoc. of VA.			Medical services					
5421 Patterson Avenue		-						
Richmond, VA 23226								
								409.00
				Ш				403.00
Account No. xxxxxxxxxxx3673			Opened 6/12/15 Last Active 8/21/15					
	1							
Net Credit			Unsecured					
200 W Jackson Blvd Ste 2		-						
Chicago, IL 60606								
								6,861.00
	┸			丄		L	4	0,001100
Account No. xxxxxxxxxxx4705			Opened 5/15/13 Last Active 9/04/15					
	1							
Wells Fargo Bank			Secured Credit Card					
Po Box 14517		-						
Des Moines, IA 50306								
								409.00
	┺	<u> </u>		+	+	╀	4	
Account No.	1							
	1							
	1_	<u> </u>				_	+	
Sheet no. <u>1</u> of <u>1</u> sheets attached to Schedule of				Sub				12,772.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	)	12,112.00
				,	Γota	a1	Γ	
			(Report on Summary of S					58,544.00
			(Report on Summary of S	cne	uul	es)	'L	30,0 : ::30

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B6G (Official Form 6G) (12/07)

In re	Robert T. Hill		Case No	15-34969	
_		Debtor			

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-34969-KLP Doc 7 Filed 09/29/15 Entered 09/29/15 18:53:43 Desc Main Document Page 14 of 45

B6H (Official Form 6H) (12/07)

In re	Robert T. Hill	,	Case No	15-34969	
		Debtor			

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Debtor 1	Robert T. Hi	ll		
Debtor 2 (Spouse, if filing)				
United States Bank	ruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA	
Case number (If known)	15-34969 m B 6I		-	Check if this is:  An amended filing  A supplement showing post-petition chapter 13 income as of the following date:  MM / DD/ YYYY
Schedule I	: Your Inc	ome		12/13
<u> </u>	sheet to this form.			about your spouse. If more space is needed, se number (if known). Answer every question
Part 1: Desc	ribe Employment		ional pages, write your name and ca	se number (if known). Answer every question
Part 1: Description Descriptio	ribe Employment		Debtor 1	Se number (if known). Answer every question  Debtor 2 or non-filing spouse
Part 1: Description Descriptio	ribe Employment  nployment  ore than one job, rate page with		ional pages, write your name and ca	se number (if known). Answer every question
Part 1: Description 1. Fill in your en information.  If you have mo attach a separ.	ribe Employment  nployment  ore than one job, rate page with	On the top of any additi	Debtor 1  Employed	Debtor 2 or non-filing spouse  Employed  Not employed
Part 1: Description 1. Fill in your en information.  If you have mo attach a separinformation ab employers.	ribe Employment  Inployment  The than one job, rate page with rout additional  The seasonal, or	On the top of any additi	Debtor 1  Employed  Not employed	Debtor 2 or non-filing spouse  Employed  Not employed
Part 1: Description  1. Fill in your en information.  If you have mo attach a separ information ab employers.  Include part-tir self-employed	ribe Employment  mployment  ore than one job, rate page with rout additional  me, seasonal, or work.  ay include student	On the top of any additi  Employment status  Occupation	Debtor 1  Employed  Not employed  Professional Vendor Manager	Debtor 2 or non-filing spouse  Employed  Not employed  Cafeteria Asst. Manager  Chesterfield County Public
Part 1: Description  1. Fill in your en information.  If you have mone attach a separal information ab employers.  Include part-tirn self-employed  Occupation management	ribe Employment  mployment  ore than one job, rate page with rout additional  me, seasonal, or work.  ay include student	On the top of any additi  Employment status  Occupation  Employer's name	Debtor 1  ■ Employed □ Not employed Professional Vendor Manager  At&t Services, Inc.  909 Chestnut Saint Louis, MO 63101	Debtor 2 or non-filing spouse  Employed  Not employed  Cafeteria Asst. Manager  Chesterfield County Public

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

B. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		Debtor 2 or filing spouse
2.	\$	6,883.68	\$	1,424.34
3.	+\$	0.00	+\$_	0.00
4.	\$	6,883.68	\$_	1,424.34

Official Form B 6I Schedule I: Your Income page 1

Debt	or 1	Robert T. Hill				Cas	e number (if known)	15-3	4969	
	Cop	y line 4 here			4.	Fo	or Debtor 1 6,883.68		Debtor 2 or a-filing spouse 1,424.34	
5.	•	all payroll deduction					<u> </u>	. —		<u> </u>
3.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Mandatory contribu Voluntary contribu Required repaymer Insurance Domestic support Union dues Other deductions.	d Social Securions for retire tions for retire nts of retireme obligations	ement plans ment plans	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	\$ \$ \$ \$ \$	1,368.74 0.00 0.00 183.84 231.96 0.00 0.00 0.00	\$ \$ \$ \$ \$ +	161.52 83.62 0.00 0.00 0.00 0.00 0.00	
6.	Add	the payroll deductio	ons. Add lines 5	ia+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,784.54	\$_	245.14	<u>L</u>
7.	Cald	culate total monthly t	ake-home pay.	Subtract line 6 from line 4.	7.	\$	5,099.14	\$_	1,179.20	<u>)</u>
8.	List 8a.	profession, or farm Attach a statement	ental property and the second property and necessary but the second property and necessary but the second property and second property are second property are second property and second property are second property are second property and second property are second property are second property and second property are second property are second property and second property are second	: and from operating a business, y and business showing gross siness expenses, and the total	8a.	\$	0.00	\$	0.00	
	8b.	Interest and divide			8b.		0.00	\$ 	0.00 0.00	
	8d. 8e. 8f.	Family support pay regularly receive Include alimony, spo settlement, and prop Unemployment con Social Security Other government Include cash assista	ousal support, coperty settlement mpensation  assistance that ance and the vach as food stame Program) or he	at you regularly receive lue (if known) of any non-cash assista ps (benefits under the Supplemental	8c. 8d. 8e.	\$	0.00 0.00 0.00	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00	
	oy.	rension of remem		Amortized tax refund \$6,695	og.	Ψ_	0.00	Ψ_	0.00	<u>'</u>
	8h.	Other monthly inco			8h.	+ \$	557.91	+ \$_	0.00	_
9.	Add	all other income. Ad	dd lines 8a+8b+	8c+8d+8e+8f+8g+8h.	9.	\$_	557.91	\$_	0.0	0
10.		culate monthly incom the entries in line 10 f		line 9. Debtor 2 or non-filing spouse.	10.	<u> </u>	5,657.05 + \$	1,1		6,836.25
11.	Inclu othe	ude contributions from or friends or relatives. not include any amoun	an unmarried p	the expenses that you list in Schedartner, members of your household, you ded in lines 2-10 or amounts that are	your depe			•		0.00
12.		e that amount on the S		ne 10 to the amount in line 11. The nedules and Statistical Summary of C					e. 12. \$ Combi	6,836.25
13.	Doy	ou expect an increas	se or decrease	within the year after you file this fo	orm?				month	ly income
		No.								
		Yes. Explain: Se	ee Schedule	J						

## Case 15-34969-KLP Doc 7 Filed 09/29/15 Entered 09/29/15 18:53:43 Desc Main Document Page 17 of 45

Fill in this	information to identify y	our case:					
Debtor 1	Robert T. Hi	II			Chec	k if this is:	
						An amended filing	
Debtor 2							wing post-petition chapter
(Spouse, if	filing)					13 expenses as of	the following date:
United Stat	es Bankruptcy Court for the	: EASTER	N DISTRICT OF VIRGIN	IIA	-	MM / DD / YYYY	
Case numb	er <b>15-34969</b>				П	A separate filing fo	r Debtor 2 because Debtor
(If known)	10 0 1000					2 maintains a sepa	
Officia	al Form B 6J						
Sche	dule J: Your	Expens	ses				12/13
Be as cor informati number (	mplete and accurate a on. If more space is n if known). Answer eve	s possible. I eeded, attac ery question.	f two married people and hanother sheet to this				
Part 1:	Describe Your Hous is a joint case?	ehold					
	o. Go to line 2.						
	es. Does Debtor 2 live	in a separat	e household?				
	□ No	•					
	☐ Yes. Debtor 2 mu	ıst file a sepa	rate Schedule J.				
2. <b>Do</b> y	ou have dependents?	□ No					
	ot list Debtor 1 Debtor 2.	Y AS	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do n	ot state the					- <u></u>	□ No
	ndents' names.			Son		2000	■ Yes
							□ No
				Son		2005	Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
	our expenses include enses of people other		lo				
	self and your depende		'es				
	_						
Part 2:	Estimate Your Ongo						
	as of a date after the						apter 13 case to report of the form and fill in the
lnoludo o	vnanasa naid far with	non ooob a	avernment eccletones i	f van kneu			
			overnment assistance i uded it on <i>Schedule I:</i>				
(Official F						Your exp	enses
4 The			<b>(</b>	a alcala Castas and as a	_		
	rental or home owner: nents and any rent for th		es for your residence. I	nclude first mortgage	e 4.\$		1,800.00
, ,	t included in line 4:	.o g.ouu o.					
4a.	Real estate taxes				4a. \$		0.00
4b.	Property, homeowner				4b. \$		0.00
4c. 4d.	Home maintenance, r Homeowner's associa				4c. \$ 4d. \$		100.00
			ominium dues I <b>r residence,</b> such as ho	me equity loans	4a. \$ 5. \$		0.00 0.00
J. Auui	ai mortgage payii	onio ioi you	i residence, such as no	ino oquity idans	υ. φ		0.00

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	Case num	ber (if known)	15-34969
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	250.00
6b. Water, sewer, garbage collection	6b.	\$	65.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	325.00
6d. Other. Specify: Security	6d.	\$	30.00
		\$	902.00
		· -	0.00
		•	244.00
		·	85.00
•		· —	150.00
·	11.	Ψ	130.00
	12.	\$	304.00
	13.	\$	150.00
			0.00
<del>-</del>		<u> </u>	0.00
	15a.	\$	0.00
		•	0.00
			131.00
		· -	0.00
· · · · · · · · · · · · · · · · · · ·		<u> </u>	0.00
	16.	\$	48.33
		·	10.00
	17a.	\$	0.00
, ,		•	0.00
		·	100.00
17d Other Specify: Vehicle unkeen VR 2003 & 2008		•	100.00
		·	100.00
	<b>3</b> 18.	\$	0.00
		\$	0.00
	19.	· —	
	nedule I: Y	our Income.	
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.		
20D. Neal estate taxes		\$	0.00
			0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
<ul><li>20c. Property, homeowner's, or renter's insurance</li><li>20d. Maintenance, repair, and upkeep expenses</li></ul>	20c. 20d.	\$ = ===================================	0.00 0.00
<ul><li>20c. Property, homeowner's, or renter's insurance</li><li>20d. Maintenance, repair, and upkeep expenses</li><li>20e. Homeowner's association or condominium dues</li></ul>	20c. 20d. 20e.	\$ \$ \$	0.00 0.00 0.00
<ul><li>20c. Property, homeowner's, or renter's insurance</li><li>20d. Maintenance, repair, and upkeep expenses</li></ul>	20c. 20d.	\$ \$ \$	0.00 0.00
<ul><li>20c. Property, homeowner's, or renter's insurance</li><li>20d. Maintenance, repair, and upkeep expenses</li><li>20e. Homeowner's association or condominium dues</li></ul>	20c. 20d. 20e.	\$ \$ \$	0.00 0.00 0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	20c. 20d. 20e. 21.	\$ \$ \$ +\$	0.00 0.00 0.00 0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21.	20c. 20d. 20e. 21.	\$ \$ \$ +\$	0.00 0.00 0.00 0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	20c. 20d. 20e. 21.	\$ \$ \$ +\$	0.00 0.00 0.00 0.00 4,784.33
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income.	20c. 20d. 20e. 21. 22.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	20c. 20d. 20e. 21. 22.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 4,784.33
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify:  Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	20c. 20d. 20e. 21. 22.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 4,784.33
	Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property Tax \$580 year Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Misc. Expenses Vehicle upkeep YR 2003 & 2008 Your payments of alimony, maintenance, and support that you did not report a deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Scl	6d. Other. Specify: Security  Food and housekeeping supplies  7. Childcare and children's education costs  8. Clothing, laundry, and dry cleaning  Personal care products and services  Medical and dental expenses  10. Medical and dental expenses  Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: Personal Property Tax \$580 year  16. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  Misc. Expenses  17c.  Yother Specify:  Wehicle upkeep YR 2003 & 2008  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yother Read Property expenses not included in lines 4 or 5 of this form or on Schedul	6d. Other. Specify: Security  Food and housekeeping supplies  Childcare and children's education costs  Responsibility, and dry cleaning  Personal care products and services  Medical and dental expenses  Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: Personal Property Tax \$580 year  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: Misc. Expenses  17d. Other. Specify: Misc. Expenses  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

### United States Bankruptcy Court Eastern District of Virginia

In re	Robert T. Hill			Case No.	15-34969
			Debtor(s)	Chapter	13
	<b>DECLARATIO</b> DECLARATION UN			R'S SCHEDUL	
	I declare under penalty of pe of 18 sheets, and that they are true				
Date	September 25, 2015	Signature	/s/ Robert T. Hil	I	
			Robert T. Hill		
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

### United States Bankruptcy Court Eastern District of Virginia

In re	Robert T. Hill		Case No.	15-34969
		Debtor(s)	Chapter	13

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$67,317.82 2015 YTD: At&t 9/21/15

\$81,587.00 2014: 1040 Income Tax Return

\$80,000.00 2013: Approx.

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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#### 3. Payments to creditors

None П

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Select Portfolio Svcin Po Box 65250 Salt Lake City, UT 84165 DATES OF AMOUNT STILL AMOUNT PAID **PAYMENTS Monthly Mortgage Payment** \$3,600.00 \$328,492.00

\$1.800

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF **TRANSFERS OWING TRANSFERS**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Springleaf Financial S 601 Nw 2nd St

Evansville, IN 47708

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 9/22/2015

DESCRIPTION AND VALUE OF PROPERTY

2003 GMC Yukon 240,000 Miles \$6,125.00

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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NAME AND ADDRESS OF PAYEE

Winslow & McCurry, PLLC 1324 Sycamore Sq. Suite 202 C Midlothian, VA 23113 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR September 2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$0.00 Paid prior to filing:
(SUBTRACT \$0.00) \$5,050
Attorney fee in the plan plus 13
ind. USB Filing Fee \$310/ \$38
Credit Report

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

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NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS **ENDING DATES** 

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



**ADDRESS** NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

#### DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date September 25, 2015
Signature / S/ Robert T. Hill
Robert T. Hill
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form B203

2014 USBC, Eastern District of Virginia

### United States Bankruptcy Court Eastern District of Virginia

In re Robert T. Hill	Robert T. Hill			
	Debtor(s)	Chapter	13	

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR IN A CHAPTER 13 CASE
	(for use in the Richmond Division only)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 5,050.00
	Prior to the filing of this statement I have received \$ 0.00
	Balance Due\$\$
2.	\$ of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	■ Debtor $\square$ Other (specify)
4.	The source of compensation to be paid to me is:
	$\blacksquare  \text{Debtor}   \Box  \text{Other} (specify)$
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, as required by Local Bankruptcy Rule 2016-1(C)(3).
7.	I am electing to request compensation and reimbursement of expenses in this case:
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a).
	b. $\square$ By submitting applications for compensation in the manner set forth in Local Bankruptcy Rule 2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation pursuant to Local Bankruptcy Rule $2016-1(C)(1)(a)$ and $(C)(3)(a)$ at the commencement of the case will be deemed to have elected to request compensation in the manner set forth within Local Bankruptcy Rule $2016-1(C)(1)(c)(ii)$ .

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Form B203

2014 USBC, Eastern District of Virginia

#### **CERTIFICATION**

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**September 25, 2015** *Date* 

/s/ Christopher M. Winslow
Christopher M. Winslow 76156

Signature of Attorney

Winslow & McCurry, PLLC

Name of Law Firm 1324 Sycamore Square Suite 202C Midlothian, VA 23113 804-423-1382 Fax: 804-4231383

# NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

#### PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail)

September 25, 2015

Date

/s/ Christopher M. Winslow Christopher M. Winslow 76156

Signature of Attorney

## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court Eastern District of Virginia**

In re	Robert T. Hill	Case No.	15-34969
	Debtor(s)	Chapter	13

### CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

#### **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by  $\S$  342(b) of the Bankruptcy Code.

Robert T. Hill	X	/s/ Robert T. Hill	September 25, 2015
Printed Name(s) of Debtor(s)		Signature of Debtor	Date
Case No. (if known) <b>15-34969</b>	X		
		Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Fill in this information to identify your case:							
Debtor 1	Robert T. Hill						
Debtor 2 (Spouse, if filing							
United States B	ankruptcy Court for the: Eastern District of Virginia						
Case number (if known)	15-34969						

Check	c as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
	3. The commitment period is 3 years.									
	4. The commitment period is 5 years.									

☐ Check if this is an amended filing

### Official Form 22C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

If you have nothing to report for any line, write \$0 in the s	pace.					
				Column A Debtor 1		mn B or 2 or filing spouse
<ol><li>Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).</li></ol>	and co	ommissi	ons (before	\$	7,984.02	\$ 1,424.34
<ol> <li>Alimony and maintenance payments. Do not include Column B is filled in.</li> </ol>	payme	ents from	a spouse if	\$	0.00	\$ 0.00
4. All amounts from any source which are regularly particles of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	. Includ d, your	le regula depende	r contributions ents, parents,	\$	0.00	\$ 0.00
5. Net income from operating a business, profession,	or farr	n				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00				
Net monthly income from a business, profession, or fair	rm \$ _	0.00	Copy here ->	\$	0.00	\$ 0.00
6. Net income from rental and other real property						
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	•	0.00	Copy here ->	Φ.	0.00	\$ 0.00

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Robert T. Hill		Case numbe	r ( <i>if known</i> )	15-34969		
			Column A Debtor 1		Column B  Debtor 2 or non-filing s		
7. <b>I</b> r	nterest, dividends, and royalties		\$	0.00	\$	0.00	
8. <b>U</b>	Inemployment compensation		\$	0.00	\$	0.00	
	Oo not enter the amount if you contend that the amount received was a beninder the Social Security Act. Instead, list it here:	efit					
	For you\$0	.00					
	For your spouse \$	.00					
	<b>Pension or retirement income.</b> Do not include any amount received that we benefit under the Social Security Act.	as a	\$	0.00	\$	0.00	
re d	ncome from all other sources not listed above. Specify the source and a continctude any benefits received under the Social Security Act or payme eceived as a victim of a war crime, a crime against humanity, or internation lomestic terrorism. If necessary, list other sources on a separate page and otal on line 10c.	nts al or					
	10a.		\$	0.00	\$	0.00	
	10b.		\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.		+ \$	0.00	\$	0.00	
	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	7,984.02	+	1,424.34	= \$	9,408.36
							nthly income
Part 2	Determine How to Measure Your Deductions from Income						
13. <b>C</b>	Copy your total average monthly income from line 11.  Calculate the marital adjustment. Check one:  You are not married. Fill in 0 on line 3d.					\$	9,408.36
_	You are married and your spouse is filing with you. Fill in 0 in line 13d.						
	_						
•	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was Not dependents, such as payment of the spouse's tax liability or the spouse						
	In lines 13a-c, specify the basis for excluding this income and the amount adjustments on a separate page.						
	If this adjustment does not apply, enter 0 on line 13d.						
	13a	. \$_		_			
	13b	\$_		_			
	13c	+\$_		_			
	13d. Total	\$_	0.0	0 Co	ppy here=> 13d.		0.00
14.	Your current monthly income. Subtract line 13d from line 12.				14.	\$	9,408.36
15.	Calculate your current monthly income for the year. Follow these steps	S:					0.400.00
	15a. Copy line 14 here=>				15a.	\$	9,408.36
	Multiply line 15a by 12 (the number of months in a year).					<b>x</b> ′	12
							· <u> </u>
	15b. The result is your current monthly income for the year for this part of	the for	m.		15b.	\$1	12,900.32

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Debte	or 1	Robert T. Hill		Case number (if known)	15-34969	
16	. Calo	ulate the median family income that applies to	<b>/ou.</b> Follow these step	s:		
	16a	Fill in the state in which you live.	VA			
	16b	Fill in the number of people in your household.	5			
	16c.	Fill in the median family income for your state and To find a list of applicable median income amount	s, go online using the l		16c.	\$101,449.00
17	Llo.	instructions for this form. This list may also be available to the lines compare?	ilable at the bankrupto	y clerk's office.		
17	. <b>חטי</b> . 17a		on the ten of page 1 of	this form shock box 1. Diana	aahla inaama	is not determined under
	17 a.	11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b.	■ Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcurrent monthly income from line 14 above	ulation of Disposable			
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. §1325(b)(4)			
18.	Сор	y your total average monthly income from line 1	1		18. \$	9,408.36
19.	cont	uct the marital adjustment if it applies. If you are end that calculating the commitment period under use's income, copy the amount from line 13d.	married, your spouse 1 U.S.C. § 1325(b)(4)	is not filing with you, and you allows you to deduct part of you	our	
	If the	e marital adjustment does not apply, fill in 0 on line	19a.		19a. <b>-</b> \$	0.00
	Sub	tract line 19a from line 18.			19b.	\$ 9,408.36
20	Cal	culate your current monthly income for the year.	Follow those stops:			
20.			•		20a.	<sub>©</sub> 9,408.36
	20a	Copy line 19b				Ψ
		Multiply by 12 (the number of months in a year).				<b>x</b> 12
	20b.	The result is your current monthly income for the y	ear for this part of the	form	20b.	\$112,900.32_
	20c.	Copy the median family income for your state and	size of household from	n line 16c		\$101,449.00_
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the cou	rt, on the top of page 1 of this f	form, check b	ox 3, The commitment
		Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise ordere	d by the court, on the top of pa	ge 1 of this fo	orm, check box 4, The
Par	t 4:	Sign Below				
		igning here, under penalty of perjury I declare that	he information on this	statement and in any attachm	ents is true a	nd correct.
,	, lel	Robert T. Hill				
•	Ro	bert T. Hill				
	•	nature of Debtor 1				
	Date	September 25, 2015 MM / DD / YYYY				
	If yo	u checked 17a, do NOT fill out or file Form 22C-2.				
	If yo	u checked 17b, fill out Form 22C-2 and file it with the	nis form. On line 39 of	that form, copy your current m	onthly income	e from line 14 above.

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Fill in	this informat	tion to i	dentify your o	ase:			ı					
Debto	r1 <u>Ro</u> l	bert T.	Hill									
Debto	r 2											
(Spou	se, if filing)											
United	l States Bankr	ruptcy Co	ourt for the: _E	astern District of	of Virginia							
		-34969						Псь	aalı if thia	io on omo	الممامم	filing
(if kno	wn)								eck ii this	is an ame	naea	IIIIIg
	I Form 22C-2	-										
<u>Cha</u>	pter 13	Calc	ulation	of Your	Disposa	able Ir	come					12/14
			l need your c	ompleted copy ).	of Chapter 1	13 Stateme	nt of Your C	urrent Mon	thly incon	ne and Cald	ulation	n of
space	is needed, att	tach a se	eparate sheet	e. If two married to this form, Ir ase number (if I	nclude the lin							
Part 1	Calcula	ate Your	Deductions fr	om Your Incon	ne							
the	questions in	lines 6-	15. To find the	sues National a e IRS standards he bankruptcy	s, go online ເ	using the I						
ехр	enses if they a	are highe	r than the star	ines 6-15 regard ndards. Do not in that you subtrac	nclude any op	erating exp	enses that yo	ou subtracte	d from inc			
If yo	our expenses of	differ fror	m month to mo	onth, enter the a	verage expen	se.						
Not	e: Line numbe	ers 1-4 ar	e not used in t	his form. These	numbers app	oly to inforn	nation require	d by a simila	ar form us	ed in chapte	r 7 cas	ses.
5.	The number	r of peop	ole used in de	termining your	deductions	from inco	me					
	plus the num	nber of a		uld be claimed a ependents whor hold.					n	5		
Nat	ional Standar	rds	You must	use the IRS Na	tional Standa	rds to answ	ver the questi	ons in lines (	6-7.			
6.				Using the numb for food, clothing			l in line 5 and	the IRS Nat	tional	\$		1,891.00
7.	the dollar am	nount for are 65 or	out-of-pocket olderbecaus	nce: Using the repealth care. The elder people hay deduct the a	e number of penave a higher	eople is sp IRS allowa	lit into two ca ince for healtl	tegoriespe	ople who a	are under 65	and	

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ebtor 1 Robert T. Hill Case number (if known) 15-34969

People v	who are under 65 years of age				
7a.	Out-of-pocket health care allowance per person	\$ 60			
7b.	Number of people who are under 65	X 5	•		
7c.	Subtotal. Multiply line 7a by line 7b.	\$ 300.00	Copy line 7c here=	=> \$300.00	
People v	who are 65 years of age or older				
7d.	Out-of-pocket health care allowance per person	\$144			
7e.	Number of people who are 65 or older	X0			
7f.	Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy line 7f here=	=> \$	
7g.	Total. Add line 7c and line 7f		\$300.00	Copy total here=> 7g.	\$
bankrup Housing housing To answ separate 8. Hou fill in 9. Hou	In information from the IRS, the U.S. Trustee Progretcy purposes into two parts:  If and utilities - Insurance and operating expenses and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.  Name of the creditor  Select Portfolio Svcin	e Program chart. The available at the enses: Using the nucle and operating extends in the dollar amounts.  Indicate the dollar amounts that the dollar amounts that the dollar amounts after you in the dollar amounts after y	Fo find the chart, go bankruptcy clerk's oumber of people you expenses.  unt  ured by your home.  are file	online using the link s	specified in the 610.00
9c.	9b. Total average monthly payment  Net mortgage or rent expense.  Subtract line 9b (total average monthly payment) fr		Copy line 9b here=>	Сору	Repeat this amount on line 33a.
affe	or rent expense). If this number is less than \$0, ento claim that the U.S. Trustee Program's division exts the calculation of your monthly expenses, fill splain why:	of the IRS Local stin any additional	9c. \$Standard for housing	0.00 line 9c here=>	\$\$ \$

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Debtor 1	Robert T. Hill			Cas	se number (if knowr	15-	34969	
11.	Local transportation expenses	: Check the number of vehicl	es for which	n you claim an	ownership or o	perating	expense.	
	☐ 0. Go to line 14.							
	☐ 1. Go to line 12.							
	2 or more. Go to line 12.							
12.	Vehicle operation expense: Us operating expenses, fill in the Operating expenses operation expenses of the operation expen							488.00
13.	Vehicle ownership or lease ex You may not claim the expense more than two vehicles.							
Vel	Describe Vehicle 1:	2003 GMC Yukon 240,00	00 Miles					
13a.	Ownership or leasing costs using	g IRS Local Standard		13a.	\$ 51	7.00		
13b.	Average monthly payment for all	debts secured by Vehicle 1.						
	Do not include costs for leased v	vehicles.						
	To calculate the average monthl are contractually due to each se bankruptcy. Then dived by 60.	, , ,	,					
	Name of each creditor for	Vehicle 1	Average mpayment	onthly				
	Springleaf Financial S		\$	70.10				
				Copy 13b here =>	-\$ <b>7</b>		epeat this amo	ount
130	Net Vehicle 1 ownership or lease	e expense		nore ==	Ψ		Copy net	
100.	Subtract line 13b from line 13a.	•	enter \$0.				Vehicle 1 expense	
				13c.	\$	6.90	here => \$ _	446.90
Vel	nicle 2 Describe Vehicle 2:	2008 GMC Yukon 157,08	R6 Miles				I	
13d.	Ownership or leasing costs using	·	,	13d.	\$ 51	7.00		
13e.	Average monthly payment for all leased vehicles.	debts secured by Vehicle 2.	Do not inclu	ude costs for				
	Name of each creditor for	Vehicle 2	Average m	onthly				
			payment					
	Wfds		\$	342.54 Copy 13e				
				here =>	-\$34	2.54		
13f.	Net Vehicle 2 ownership or lease	•					Copy net Vehicle 2	
	Subtract line 13e from line 13d.	if this number is less than \$0,	enter \$0.	13f.	\$17	4.46	expense here => \$	174.46
14.	Public transportation expense Transportation expense allowance				al Standards, f	ill in the	 <i>Public</i> \$	0.00
15.	Additional public transportationals of deduct a public transportation	on expense: If you claimed 1 on expense, you may fill in wh	or more vel nat you belie	hicles in line 11				0.00
	not claim more than the IRS Loc	aı Standard for <i>Public Transp</i>	ourtation.				Ψ_	

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Debtor 1 Robert T. Hill Case number (if known) 15-34969

16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withfeld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as refirement contributions, union claes, and uniform costs.  18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spucies term life insurance. If two married people are filing together, include payments that you make for your spucies term life insurance.  19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or reful disupport. You will list these obligations in line 35.  20. Education: The total monthly amount that you pay for deducation is available for similar services.  21. Childcare: The total monthly amount that you pay for deducation is available for similar services.  22. In thick the payments for any elementary or secondary school education is available for similar services.  23. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for the latth care that is required for the health and welfare of you or your dependents and that is not reimbursed by Insurance or health savings accounts should be liked only in line 25.  24. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for telecommunication services for you and your dependents awing as account that is not reimbursed by Insurance or health savings account that is not reimbursed by Insurance or health savings account that is not reimbu	Oth	er Necessary Expenses	In addition to the expensions the following IRS category		s listed above	, you are allowed your monthly expenses	for			
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.  18. Life Insurance: The total monthly premiume that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Or for any form of life insurance other than term.  19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spoused or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  20. Education: The total monthly amount that you pay for deducation that is either required: as a condition for your job, or mentally challenged dependent child if no public education is available for similar services.  21. Childrace: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.  22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or peal by a health savings accounts should be listed only in line 25.  23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waining, caller identification, special long distance, or businesse cell phone service, to the extent necessary for your high month that you pay for telecommunication services for you and your dependents, the necessary for your health and veller or that of your dependents or for the production of income, if it is not reimbursed by your employer.  24. Add all of the expenses allowed	16.	self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.						1,368.74		
Do not include amounts that are not required by your job, such as voluntary 401 (k) contributions or payroll savings.  18. Life Insurance: The total monthly permitted that you pay for your septises term life insurance. If two married people are ling together, include permitted for file insurance or your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.  19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.  20. Childcare: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.  21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  22. Additional health care expresses, excluding insurance costs: The monthly amount that you pay for health are that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call winding, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  24. Add all of the expenses allowed under the IRS expense allowances listed in lines €-24.  25. Health insurance, di	17.			deductions th	nat your job re	quires, such as retirement				
Filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance or for file insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance, or for your phase that you pay as required by the order of a court or administrative agency, such as spousal or child support, You will list these obligations in line 35. \$ 0.00				ur job, such a	s voluntary 40	01(k) contributions or payroll savings.	\$	183.84		
administrative agency, such as spousal or child support payments.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  Do not include payments on your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.  Do not include payments for any elementary or secondary school education.  20. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not relimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.  30. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extern necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.  \$	18.	filing together, include pay Do not include premiums f	\$	0.00						
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0.00	26.	Disability insurance Health savings account  Total  Do you actually spend this  No. How much do  Yes  Continued contributions continue to pay for the rea	you actually spend?  to the care of househol sonable and necessary care.	+ \$ \$ \$ Id or family are and supp	98.00  members. The port of an elder	e actual monthly expenses that you will	\$			
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Debtor 1	Robert T. Hill	Ca	se number (if kn	own)	15-3	4969			
28.	Additional home energy costs. Your home allowance on line 8.	e energy costs are included in your non-mo	rtgage housir	ng a	nd utiliti	es			
	If you believe that you have home energy conon-mortgage housing and utilities allowance			in th	е				
	You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.							\$	0.00
29.	Education expenses for dependent childr \$156.25* per child) that you pay for your depublic elementary or secondary school.								
	You must give your case trustee documenta claimed is reasonable and necessary and no		explain why	the	amoun	t			
	* Subject to adjustment on 4/01/16, and eve	ry 3 years after that for cases begun on or	after the date	e of a	adjustm	ent.		\$	0.00
30.	Additional food and clothing expense. Th higher than the combined food and clothing than 5% of the food and clothing allowances	allowances in the IRS National Standards.							
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.								0.00
	You must show that the additional amount c	laimed is reasonable and necessary.						\$	0.00
31.	Continuing charitable contributions. The instruments to a religious or charitable organ		in the form o	of cas	sh or fir	nancial		\$	0.00
32.	. Add all of the additional expense deductions Add lines 25 through 31.							<b>.</b>	98.00
Ded	uctions for Debt Payment								
-	3. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Mortgages on your home							verage	monthly
33a.	Copy line 9b here					=>	\$	-	1,800.00
	Loans on your first two vehicles						Ţ,		
33b.						=>	\$		70.10
33c.						=>	\$		342.54
	ne of each creditor for other secured debt	Identify property that secures the debt		Doe	es paymude tax	nent es	*		042.04
					No				
33d.	-NONE-				Yes		\$		
					No				
33e.					Yes		\$		
					No				
33f.					Yes	+	\$		
22~	Total average monthly payment. Add lines		\$ 2	2 21	2.64	Copy total here:		¢	2,212.64
33a.		5.54 DEOLOD 5.5E							

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Case number (if known)

15-34969

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Name of the creditor Total cure amount Monthly cure amount Location: 14601 Tealby Drive, Midlothian VA 23112 **Chesterfield County** Debtor Estimate - \$305,000 **Collington Community** Tax Assessment - \$302,000 **442.00**  $\div 60 = \$$ **Associati** Zillow Range - \$295,000 - \$326,000 \$  $\div 60 = $$  $\div$  60 = +\$ Copy total 7.37 here=> \$ 7.37 Total 35. Do you owe any priority claims - such as a priority tax, child support, or alimony that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷60 \$ 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 2,220.01 37. Add all of the deductions for debt payment. Add lines 33g through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 5,462.94 expense allowances Copy line 32, All of the additional expense deductions 98.00 Copy line 37, All of the deductions for debt payment 2,220.01 7,780.95 7,780.95 Total deductions Copy total here=> \$

Robert T. Hill

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Robert T. Hill Case number (if known) 15-34969 Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 22C-1, Chapter 13 9.408.36 Statement of Your Current Monthly Income and Calculation of Commitment Period 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 22C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 \$ necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 200.76 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here. => 7,780.95 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Copy 43d 43d. Total. Add lines 43a through 43c. 0.00 0.00 here=>\$ Copy total 44. Total adjustments. Add lines 40 through 43d. 7,981.71 7,981.71 here=> -\$ 1,426.65 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 22C-1 ☐ Increase ☐ 22C-2 ☐ Decrease ☐ 22C-1 ☐ Increase ☐ 22C-2 ☐ Decrease ☐ 22C-1 ☐ Increase ☐ Decrease **22C-2** □ 22C-1 ☐ Increase ☐ 22C-2 ☐ Decrease

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Debtor 1	Robert T. Hill	Case number (if known)	15-34969
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that	the information on this statement and in any at	tachments is true and correct.
	Robert T. Hill Signature of Debtor 1		
Date	September 25, 2015 MM / DD / YYYY		

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Debtor 1 Robert T. Hill Case number (if known) 15-34969

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 03/01/2015 to 08/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **At&t** Year-to-Date Income:

Starting Year-to-Date Income: \$12,722.00 from check dated 2/28/2015. Ending Year-to-Date Income: \$60,626.14 from check dated 8/31/2015.

Income for six-month period (Ending-Starting): \$47,904.14.

Average Monthly Income: \$7,984.02.

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Debtor 1 Robert T. Hill Case number (if known) 15-34969

### **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period **03/01/2015** to **08/31/2015**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Chesterfield County

Year-to-Date Income:

Starting Year-to-Date Income: \$3,564.51 from check dated 2/28/2015. Ending Year-to-Date Income: \$12,110.54 from check dated 8/31/2015.

Income for six-month period (Ending-Starting): **\$8,546.03**.

Average Monthly Income: \_\$1,424.34\_.